



Renaissance One
Two North Central Avenue
Phoenix, Arizona 85004-2391
602.229.5200
Fax 602.229.5690
www.quarles.com

Attorneys at Law in
Milwaukee and Madison, Wisconsin
Naples and Boca Raton, Florida
Phoenix and Tucson, Arizona
Chicago, Illinois

Facsimile Transmission Form

RECEIVED
CENTRAL FAX CENTER

APR 12 2006

Date: April 12, 2006

To:	Fax No.	Phone No.
Name Company/Firm City, State Zip Country	U.S. Patent and Trademark Office Art Unit: 3677, Examiner: Lavinder, J. 571-273-8300	

From:	Robert D. Atkins	602.229.5690	602.229.5311
Re:	USSN: 10/613,281 Applicant: Brookshire, Michael D.		

Message:

IF YOU HAVE PROBLEMS RECEIVING THIS FACSIMILE, PLEASE CALL US IMMEDIATELY AT:
602.229.5361

No. of Pages (Including Cover): <u>7</u>	Job Code: _____
Client - Matter No.: <u>121236.00003</u>	Time Keeper: <u>RATKINS</u>
Recipient: <u>U.S. Patent and Trademark Office</u>	Return To: _____
Requestor Name: _____	Phone No.: _____

IMPORTANT: THIS MESSAGE IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY TO WHICH IT IS ADDRESSED AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED AND/OR CONFIDENTIAL. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, OR THE EMPLOYEE OR AGENT RESPONSIBLE FOR DELIVERING THE MESSAGE TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA REGULAR POSTAL SERVICE. THANK YOU.

RECEIVED
CENTRAL FAX CENTER

002

APR 12 2006

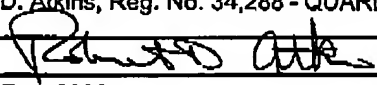
(04-04)

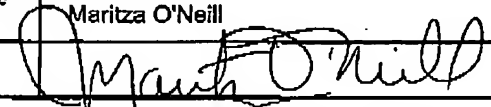
Approved for use through 07/31/2006, OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/613,281	
	Filing Date	July 3, 2003	
	First Named Inventor	Michael D. Brookshire	
	Art Unit	3677	
	Examiner Name	Lavinder, Jack W.	
Total Number of Pages in This Submission	6	Attorney Docket Number	121236.00003

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks 		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Robert D. Atkins, Reg. No. 34,288 - QUARLES & BRADY STREICH LANG LLP
Signature	
Date	April 12, 2006

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	Maritza O'Neill
Signature	
Date	April 12, 2006

This collection of information is required by 37 CFR 1.5. (The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

2003526

APR 12 2006

PTO/SB/17 (12-04)

Approved for use through 07/31/2008. OMB 0851-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number

Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL
For FY 2005**☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 180.00

Complete if Known

Application Number	10/613,281
Filing Date	July 3, 2003
First Named Inventor	Michael D. Brookshire
Examiner Name	Lavinder, Jack W.
Art Unit	3677
Attorney Docket No.	121236.00003

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 17-0055 Deposit Account Name: Quarles & Brady LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP = _____ x _____ = _____						
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
- 3 or HP = _____ x _____ = _____						
HP = highest number of independent claims paid for, if greater than 3						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____				

4. OTHER FEE(S)

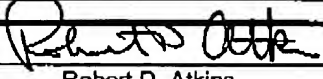
Non-English Specification, \$130 fee (no small entity discount)

Other: (1801) Submission of Information Disclosure Statement

Fees Paid (\$)

\$180.00

SUBMITTED BY

Signature		Registration No. 34,288 (Attorney/Agent)	Telephone 602-229-5311
Name (Print/Type)	Robert D. Atkins		Date April 12, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

2003534

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Michael D. Brookshire
Application Serial No. : 10/613,281
Date of Filing : July 3, 2003
Title : *METHOD OF FACETING GEMSTONES
TO PRODUCE SPIRALING EFFECT*
Confirmation Number : 4021
Group Art Unit : 3677
Examiner : Lavinder, Jack W.
USPTO Customer Number : 26707
Attorney Docket Number : 121236.00003

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT
PURSUANT TO 37 C.F.R. § 1.97

Commissioner for Patents
U.S. Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313

RECEIVED
CENTRAL FAX CENTER
APR 12 2006

Dear Sir:

Applicant hereby brings to the attention of the Examiner the documents noted on the accompanying Form PTO-1449. This Information Disclosure Statement is being filed after an office action on the merits.

It is respectfully requested that the information cited herein be expressly considered during the prosecution of this application and made of record on any patent to issue therefrom. Inclusion of a reference on the enclosed Form PTO-1449 is not to be construed as indicating the reference is prior art with respect to the subject application. Submission of this Information Disclosure Statement is not to be taken as evidence that a search has been conducted.

04/13/2006 TL0111 00000061 170055 10613281
01 FC:1806 100.00 DA

QBPHX2003536.1

USPTO Serial No. 10/613,281
Applicant: Brookshire, M.
Supplemental Information Disclosure Statement

The Commissioner is hereby authorized to charge any fees due with this filing, or credit any overpayment, to Deposit Account No. 17-0055.

Respectfully submitted,
QUARLES & BRADY STREICH LANG LLP

By: 

Robert D. Atkins
Reg. No. 34,288

Address all correspondence to:

Robert D. Atkins
Quarles & Brady Streich Lang LLP
One Renaissance Square
Two North Central Avenue
Phoenix, AZ 85004
Telephone: (602) 229-5311
Facsimile: (602) 229-5690
Email: rda@quarles.com

Sheet	1	of	2
-------	---	----	---

PAGE 6/7 * RCVD AT 4/12/2006 5:29:38 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-3/2 * DNIS:2738300 * CSID:602 229 5690 * DURATION (mm-ss):02:40

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)		Complete if Known	
		Application Number	10/613,281
		Filing Date	July 3, 2003
		First Named Inventor	Michael D. Brookshire
		Art Unit	3677
		Examiner Name	Lavinder, Jack W.
Sheet 2	of 2	Attorney Docket Number	121236.00003

OTHER PRIOR ART—NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
		NONE.	

Examiner Signature	Date Considered
--------------------	-----------------

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.
 1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.
 This collection of information is required by 37 CFR 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 120 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

2003530